

**Lead and Copper - 90th PERCENTILE COMPLIANCE Report**

(For Systems Required to Collect More Than 5 Samples)

I. PWS INFORMATION: Please refer to your DEP Lead & Copper sampling plan for approved sampling locations.

PWS ID #: **3213000** City / Town: **NORTH READING**PWS Name: **North Reading Water Department** PWS Class: COM ☒ NTNC ☐

Sampling Frequency: (choose one)	<input type="checkbox"/> FIRST SEMI-ANNUAL SAMPLING PERIOD	<input checked="" type="checkbox"/> REDUCED - EVERY THREE YEARS
	<input type="checkbox"/> SECOND SEMI-ANNUAL SAMPLING PERIOD	<input type="checkbox"/> LEAD SERVICE LINE (LSL) REPLACEMENT PROGRAM
	<input type="checkbox"/> REDUCED - ANNUAL	<input type="checkbox"/> DEMONSTRATION

Step 1: Place lead results in ascending order (from lowest to highest value) with lowest value at # 1, in the table below. Repeat for copper results. Please report results that are ND or less than (<) the laboratory's reported detection limit (MDL) as zero. Results at or above the laboratory's detection limit (MDL) but below 0.005 mg/L for lead or 0.05 mg/L for copper shall be reported as measured or may be reported as 0.0025 mg/L for lead or 0.025 mg/L for copper.

Step 2: Multiply the total number of samples collected by 0.9 (this is your 90th percentile sample number). Round to the nearest whole number, if necessary.

Step 3: Compare the sample result at the 90th percentile sample number against the corresponding action level. If the 90th percentile value is higher than the action level, then you have an exceedance and are required to contact MassDEP as soon as possible for information on compliance actions.

Note: Do not include school results on this form unless the PWS is a school.

LEAD RESULTS (mg/L)							
#	Results	#	Results	#	Results	#	Results
1*	ND	16	ND	31		46	
2	ND	17	ND	32		47	
3	ND	18	ND	33		48	
4	ND	19	ND	34		49	
5	ND	20	0.001	35		50	
6	ND	21	0.001	36		51	
7	ND	22	0.002	37		52	
8	ND	23	0.002	38		53	
9	ND	24	0.002	39		54	
10	ND	25	0.003	40		55	
11	ND	26	0.003	41		56	
12	ND	27	0.005	42		57	
13	ND	28	0.005	43		58	
14	ND	29	0.007	44		59	
15	ND	30	0.034	45		60	

COPPER RESULTS (mg/L)							
#	Results	#	Results	#	Results	#	Results
1*	0.003	16	0.067	31		46	
2	0.005	17	0.069	32		47	
3	0.011	18	0.070	33		48	
4	0.019	19	0.073	34		49	
5	0.030	20	0.075	35		50	
6	0.035	21	0.076	36		51	
7	0.037	22	0.076	37		52	
8	0.042	23	0.078	38		53	
9	0.051	24	0.080	39		54	
10	0.056	25	0.080	40		55	
11	0.063	26	0.086	41		56	
12	0.063	27	0.087	42		57	
13	0.065	28	0.101	43		58	
14	0.065	29	0.117	44		59	
15	0.066	30	0.121	45		60	

*Lowest Value

My system was required to collect: 30 lead and copper samples. My system collected: 30 lead and copper samples.Total # of samples collected: 30 x 0.9 = 27 This number is my system's 90th percentile sample #.Circle the 90th percentile sample # for both lead and copper in the table above, and enter the results in the appropriate spaces below.

0.005	Compared to 0.015 mg/L	0.087	Compared to 1.3 mg/L
(Lead result at 90 th percentile sample#)	(The lead action level)	(Copper result at 90 th percentile sample#)	(The copper action level)

II. CERTIFICATION:

Check and complete the correct statement for lead as determined by the above results. If you have an exceedance and you are a community system you must comply with the Consumer Confidence Rule (CCR) reporting requirements in accordance with 310 CMR 22.16A(4)(i)6.

☒ My system was at or below the lead action level.☐ My system exceeded the lead action level and _____ sampling sites exceeded the lead action level.
(Insert # of samples)

Check and complete the correct statement for copper as determined from the above results. If you have an exceedance and you are a community system you must comply with the Consumer Confidence Rule (CCR) reporting requirements in accordance with 310 CMR 22.16A(4)(i)6.

☒ My system was at or below the copper action level.☐ My system exceeded the copper action level and _____ sampling sites exceeded the copper action level.
(Insert # of samples)

My signature below indicates that all sampling sites on this report have been previously approved in writing by the DEP and that I have complied with 310 CMR 22.06B(7). I have also notified the owner of each sampling site of their sites' individual results. I certify under penalty of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best of my knowledge and belief.

Water Superintendent
Title

Signature of PWS or Owner's Representative

11/1/12
Date

Please submit Form LCR-C along with this form.

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Lead and Copper Analysis Report

I. PWS INFORMATION: Please refer to your DEP Lead & Copper sampling plan for approved sampling locations.

PWS ID #: 3213000

City / Town: NORTH READING

PWS Name: North Reading Water Department

PWS Class: COM ☒ NTNC ☐ TNC ☐

Routine or Special Samples <input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	Original, Resubmitted or Confirmation Report <input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	If Resubmitted Report, list below:	
		(1) Reason for Resubmission <input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction	(2) Collection Date of Original Sample
SAMPLE NOTES - (Such as, if a Manifold/Multiple sample, list the sources that were on-line during sample collection).			

II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab MA Cert. #: M-MA086

Primary Lab Name: Alpha Analytical

Subcontracted? (Y/N) N

Analyte	Action Level (mg/L)	Lab Method	MDL (mg/L)	Analysis Lab MA Cert.#	Analysis Lab Name
Lead:	0.015	200.8	0.001	M-MA086	Alpha Analytical
Copper:	1.3	200.8	0.001	M-MA086	Alpha Analytical

LAB SAMPLE NOTES

DEP Approved Sample Location (See DEP approved LCR plan for sampling locations)	Collection Date	LEAD		COPPER		Lab Sample ID#
		Result (mg/L)	Date Analyzed	Result (mg/L)	Date Analyzed	
1	8/31/2012	ND	9/8/2012	0.037	9/8/2012	L1215858-12
2	9/1/2012	ND	9/8/2012	0.069	9/8/2012	L1215858-03
3	9/2/2012	0.002	9/8/2012	0.070	9/8/2012	L1215858-04
4	9/4/2012	0.001	9/8/2012	0.019	9/8/2012	L1215858-06
5	9/4/2012	0.003	9/8/2012	0.035	9/8/2012	L1215858-10
6	9/4/2012	ND	9/8/2012	0.042	9/8/2012	L1215858-07
7	9/4/2012	ND	9/8/2012	0.063	9/8/2012	L1215858-14
8	9/4/2012	ND	9/8/2012	0.073	9/8/2012	L1215858-15
9	9/4/2012	ND	9/8/2012	0.080	9/8/2012	L1215858-08
10	9/4/2012	0.034	9/8/2012	0.117	9/8/2012	L1215858-13
11	9/5/2012	ND	9/8/2012	0.011	9/8/2012	L1215858-09
12	9/5/2012	ND	9/8/2012	0.067	9/8/2012	L1215858-05
13	9/5/2012	0.003	9/8/2012	0.075	9/8/2012	L1215858-11
14	9/5/2012	ND	9/8/2012	0.076	9/8/2012	L1215858-02
15	9/6/2012	0.007	9/8/2012	0.030	9/8/2012	L1215858-01
16	9/6/2012	0.002	9/15/2012	0.066	9/15/2012	L1216313-07
17	9/7/2012	0.001	9/15/2012	0.063	9/15/2012	L1216313-06
18	9/7/2012	ND	9/15/2012	0.076	9/15/2012	L1216313-08
19	9/7/2012	0.002	9/15/2012	0.101	9/15/2012	L1216313-09
20	9/8/2012	ND	9/15/2012	0.065	9/15/2012	L1216313-05

Report SCHOOL RESULTS collected in accordance with 310 CMR 22.06B (7)(a)9 below. Do not use these school results in 90th percentile calculations.

1	Hood School 1	9/12/2012	ND	9/15/2012	0.114	9/15/2012	L1316313-03
2	Hood School 2	9/12/2012	ND	9/15/2012	0.030	9/15/2012	L1216313-04
3	Little School 1	9/13/2012	ND	9/15/2012	0.312	9/15/2012	L1216313-01
4	Little School 2	9/13/2012	ND	9/15/2012	0.294	9/15/2012	L1216313-02

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature:

Date:

11/1/2012

If not submitting these results electronically, mail ONE copy of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

COM & NTNC Public Water Suppliers must submit Forms LCR-D or LCR-E with this form to the appropriate DEP Regional Office.

DEP REVIEW STATUS (Initial & Date)	Review Comments
<input type="checkbox"/> Accepted <input type="checkbox"/> Disapproved	



Lead and Copper Analysis Report

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Copper:	1.3	200.8	0.001	M-MA086	Alpha Analytical

LAB SAMPLE NOTES

DEP Approved Sample Location (See DEP approved LCR plan for sampling locations)		Collection Date	LEAD		COPPER		Lab Sample ID#
			Result (mg/L)	Date Analyzed	Result (mg/L)	Date Analyzed	
1		9/18/2012	ND	10/10/2012	0.051	10/10/2012	L1217697-01
2		9/19/2012	ND	10/10/2012	0.078	10/10/2012	L1217697-02
3		9/27/2012	ND	10/10/2012	0.080	10/10/2012	L1217697-03
4		9/25/2012	ND	10/10/2012	0.005	10/10/2012	L1217697-04
5		9/12/2012	0.005	10/10/2012	0.086	10/10/2012	L1217697-05
6		9/27/2012	0.005	10/10/2012	0.121	10/10/2012	L1217697-06
7		9/26/2012	ND	10/10/2012	0.087	10/10/2012	L1217697-07
8		9/27/2012	ND	10/10/2012	0.003	10/10/2012	L1217697-08
9		9/26/2012	ND	10/10/2012	0.065	10/10/2012	L1217697-09
10		9/26/2012	ND	10/10/2012	0.056	10/10/2012	L1217697-10
11							
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20							

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3	Little School 1	9/13/2012	ND	9/15/2012	0.312	9/15/2012	L1216313-01
4	Little School 2	9/13/2012	ND	9/15/2012	0.294	9/15/2012	L1216313-02

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature:

(Compiled by M. Clark, NWRD)

Date: 11/1/2012

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DEP REVIEW STATUS (Initial & Date)	Review Comments
<input type="checkbox"/> Accepted <input type="checkbox"/> Disapproved	